

Fax to 703-872-9306 on 11/03/2004

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PTO/SB/21 (09-04)

Approved for use through 07/31/2008. OMB 0651-0031

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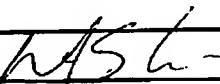
(to be used for all correspondence after initial filing)

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|--|---|------------------------|-----------------|
| | | Application Number | 10/773,739 |
| | | Filing Date | 02/06/2004 |
| | | First Named Inventor | Gonzalez |
| | | Art Unit | 1724 |
| | | Examiner Name | Ivars C Cintins |
| Total Number of Pages in This Submission | 6 | Attorney Docket Number | GONZ01DV1 |

ENCLOSURES (Check all that apply)

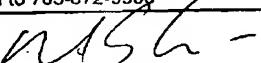
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| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
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| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
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| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
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| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application | <input type="checkbox"/> Landscape Table on CD | |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | |
| Remarks | | |
| - in response to Office Action dated 09/09/2004 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|---|----------|-------|
| Firm Name | | | |
| Signature |  | | |
| Printed name | David S Alavi | | |
| Date | 11/03/2004 | Reg. No. | 40310 |

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage ~~as first class mail~~ in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Faxed to 703-872-9306

| | | | |
|-----------------------|---|--------|-------|
| Signature |  | | |
| Typed or printed name | David S Alavi | Reg No | 40310 |
| Date | 11/03/2004 | | |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Docket No. GONZ01DV1 **RECEIVED**
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App. No.: 10/773,739

Art Unit: 1724

Filed: 02/06/2004

Examiner: Ivars C Cintins

Applicants: Gonzalez et al

For: Apparatus for treating metal-working fluid

AMENDMENT AND REQUEST FOR RECONSIDERATION UNDER 37 CFR §1.111Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

11/03/2004

Sir:

In response to the Office Action dated 09/09/2004, please amend the above named application as set forth hereinbelow. The amendments are presented in accordance with the Revised Amendment Practice set forth in 37 CFR § 1.121 effective 07/30/2003.

Amendments to the Claims are reflected in the listing of Claims which begins on page 2 of this paper.

Remarks begin on page 4 of this paper.